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Electronic Filing System (EFS) Data  
Electronic Patent Application Submission  
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EFS ID: 54150  
Application ID: 09610081  
Title of Invention: Printer Apparatus With Integrated Graphical User Interface and Methods for Using the Same  
First Named Inventor: Sherry Cook  
Domestic/Foreign Application: Domestic Application  
Filing Date: 2000-07-05  
Effective Receipt Date: 2004-01-23  
Submission Type: Information Disclosure Statement  
Filing Type:  
Confirmation number: 5006  
Attorney Docket Number: LE9-00-045  
Total Fees Authorized: 180.0  
Payment Category: Credit Card  
Credit Card Number: \*\*\*\*\*7834  
Expiration Date: 03312005  
Card Holder Name: Laurie Shirk  
Postal Code: 45202  
RAM Payment Status: RAM success  
RAM User ID: EFSPROD  
RAM Accounting Date: 2004-01-23  
RAM Sequence Number: 891898

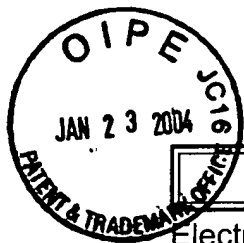


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TRANSMITTAL

Electronic Version v1.1  
Stylesheet Version v1.1.0

Title of Invention	Printer Apparatus With Integrated Graphical User Interface and Methods for Using the Same
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Application Number: 09/610081 

Date: 2000-07-05

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Submitted by:	Elec. Sign.	Sign. Capacity
Geoffrey Oberhaus Registered Number: 42955	/GLO/	Attorney

Documents being submitted

us-ids

us-fee-sheet

Files

21043-93-usidst.xml

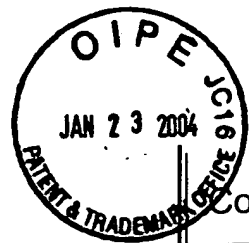
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Comments

**FEE TRANSMITTAL**

Electronic Version v08  
Stylesheet Version v08.0

<b>Title of Invention</b>	Printer Apparatus With Integrated Graphical User Interface and Methods for Using the Same										
Application Number: 09/610081											
Date: 2000-07-05		<b>RECEIVED</b> JAN 28 2004 Technology Center 2600									
First Named Applicant: Sherry Cook											
Attorney Docket Number: LE9-00-045											
Examiner: K. Poon											
<b>TOTAL FEE AUTHORIZED \$180</b>											
Patent fees are subject to annual revisions on or about October 1st of each year.											
<b>BASIC FILING FEE</b>											
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Submission Of Information Disclosure Stmt Fee</td><td>1806</td><td>180</td><td>180</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Submission Of Information Disclosure Stmt Fee	1806	180	180
Fee Description	Fee Code	Amount \$	Fee Paid \$								
Submission Of Information Disclosure Stmt Fee	1806	180	180								
<b>AUTHORIZED BILLING INFORMATION</b>											
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:											
Credit account number: 7834											
Expiration Date (YYYYMMDD): 2005-03-31											
Authorized name: Laurie Shirk											
Billing address: 45202											